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## BIB DATA SHEET

CONFIRMATION NO. 8290

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/562,494	04/27/2006	514	1617	200.1163US		
<b>RULE</b>						
<b>APPLICANTS</b> Benjamin Oshlack, New York, NY; Curtis Wright, Norwalk, CT; Chris Breder, Greenwich, CT; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US04/29521 09/09/2004 which claims benefit of 60/506,222 09/25/2003 <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 05/24/2006						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/RENEE CLAYTOR/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWINGS</b> 12	<b>TOTAL CLAIMS</b> 26	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> Davidson, Davidson & Kappel, LLC 485 7th Avenue 14th Floor New York, NY 10018 UNITED STATES						
<b>TITLE</b> Pharmaceutical combinations of hydrocodone and naltrexone						
<b>FILING FEE RECEIVED</b> 1030	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		